

Sister Cities Foundation Board Member Application

Name	Employer	Position
Address	City	Zip
Home telephone	Business telephone	
Email address		

Briefly describe your background & experience:

List any special training, skills, or experience you may have that would be pertinent for a Sister Cities Board Member:

Send completed form to: BSCF, Beaverton City Hall, 4755 SW Griffith Dr., or
P.O. Box 4755, Beaverton, OR 97076